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BOROUGH OF HOVE



# ANNUAL REPORT

of the

**Medical Officer of Health**

and

**Principal School Medical Officer**

for

**1962**

on the

**HEALTH, WELFARE AND  
SCHOOL HEALTH SERVICE**

---

**N. E. CHADWICK, M.A., M.D., D.P.H.**

*Medical Officer of Health and Principal School Medical Officer.*

**Town Hall Annexe, Third Avenue, Hove, Sx. Tel. Hove 31011.**



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## PUBLIC HEALTH COMMITTEE.

HIS WORSHIP THE MAYOR.

(Councillor W. R. Smith)

THE DEPUTY MAYOR.

(Councillor F. H. Nixon)

*Chairman* : Councillor H. Leonard.

*Vice-Chairman* : Councillor H. G. Clark.

Alderman T. Benson.

Alderman J. L. B. Jayne.

Councillor D. Benjamin.

Councillor C. S. Leach.

Councillor Mrs. M. M. Roberts.

Councillor Mrs. G. A. Squire-Cox.

Councillor W. H. Stevens.

Councillor L. J. E. Sykes.

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## HEALTH AND WELFARE SERVICES COMMITTEE.

HIS WORSHIP THE MAYOR.

(Councillor W. R. Smith)

THE DEPUTY MAYOR.

(Councillor F. H. Nixon).

*Chairman* : Alderman T. Benson.

*Vice-Chairman* : Councillor H. Leonard.

Alderman A. H. Dilley.

Councillor D. Benjamin.

Councillor J. Casemore.

Councillor H. G. Clark.

Councillor M. de Jersey Creswick.

Councillor H. Lindsey-Lewis.

Councillor Mrs. M. M. Roberts.

Councillor Mrs. G. A. Squire-Cox.

*Co-opted Member* : Mrs. C. C. Gardam.

## EDUCATION.

### Special Services Committee.

Councillor D. Benjamin.  
Mrs. E. F. Cave (Chairman).  
Mrs. C. A. Clarke (Vice-Chairman).  
Councillor M. de Jersey Creswick.  
Councillor P. Earl.  
Miss L. M. Gibson.  
Councillor H. Leonard.  
Alderman H. F. Parker.  
Councillor B. D. Sanders.  
Councillor Mrs. G. A. Squire-Cox.

### Ex-Officio :

His Worship the Mayor, Councillor W. R. Smith.  
Councillor F. H. Nixon (Chairman—Education Committee).  
Councillor Mrs. L. V. Ryan (Vice-Chairman—Education Committee).

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## PARTICULARS REGARDING STAFF.

(As at 31st December, 1962.)

### Medical Staff :

*Medical Officer of Health and Principal School Medical Officer :*  
N. E. Chadwick, M.A., M.D., D.P.H.

*Deputy Medical Officer of Health :*  
R. D. G. MacLennan, L.R.C.P.(Edin.), L.R.C.S.(Edin.), L.R.F.P. & S.  
(Glas.), D.P.H.

*Assistant Medical Officers of Health :*  
A. Firth, M.R.C.S., L.R.C.P., F.R.C.S.(Edin.), D.P.H.  
N. Eyles, M.B., Ch.B., D.P.H.

### Dental Staff :

H. M. Phillips, L.D.S.  
A. R. Spackman, L.D.S., R.C.S.  
P. H. S. Lahaise, B.D.S., L.D.S., R.C.S., (Part-time).

### *Attendants :*

Miss B. E. Andrews.  
Miss P. J. Denyer.  
Mrs. I. D. Baker.

*Clerks :* (School Health Service)—Mrs. N. G. Elliott.  
Miss G. M. Lewins.

## Public Health Inspector's Staff :

### *Chief Public Health Inspector :*

F. Dransfield, C.S.I.B., and Meat Insp. Cert.

### *Public Health Inspectors :*

K. T. Aston, C.S.I.B., and Meat Insp. Cert.

J. Clements, C.S.I.B., and Meat Insp. Cert.

C. Day, C.S.I.B., and Meat Insp. Cert.

R. A. Gates, C.S.I.B., and Meat Insp. Cert.

H. Ridler, C.S.I.B., and Meat Insp. Cert.

**Clerks :** Mrs. B. Cobley.  
Mrs. M. J. Jupp.

## Health Visiting Staff :

*Area County Nursing Superintendent, Superintendent Health Visitor and  
Non-Medical Superintendent of Midwives :*

Miss I. O. Linton, S.R.N., S.C.M., H.V.Cert.

### *Health Visitors :*

Mrs. J. E. Bard.

Miss B. Boxall.

Mrs. M. Goldsmith.

Miss D. M. Hamilton.

Miss E. M. Kirkhope.

Miss M. C. Mace.

Miss S. P. Manser.

Miss I. M. Perrin.

Mrs. I. W. Petherick.

Miss O. R. Wigner.

### *Geriatric Visitors :*

Miss R. M. Edwards.

Miss S. Hoad.

*Tuberculosis Visitor :* Miss M. Payne.

*Home Help Organiser :* Mrs. F. E. Dibb.

## Clerical Staff :

*Senior Administrative Assistant :* F. L. Peet.

### *Clerks :*

J. F. Johnson.

Mrs. V. A. Nicholls.

Miss M. Craig.

Mrs. D. Tidmarsh.

Mrs. M. Stacey (Vaccination/Immunisation).

Mrs. E. Macdonald (Infant Welfare Clerk).

Mrs. J. Blackford.

Mrs. G. Sanders (*Part-time*).

**Day Nursery :**

*Matron* : Mrs. M. M. Waters.

*Sister* : Miss E. Gillam.

**Mental Welfare Officer :**

L. Oliver.

**Home Teachers of the Blind :**

Miss A. I. Minns.

B. J. Clark.

**Public Analyst :**

V. C. Branson, B.Sc., A.R.C.S., D.I.C., F.R.I.C.





BOROUGH OF HOVE

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# ANNUAL REPORT

## MEDICAL OFFICER OF HEALTH

FOR 1962

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Mr. Chairman, Ladies and Gentlemen,

My Annual Report for 1962 follows the precedent of last year in that it deals in the three sections with all aspects of the work and responsibilities of the Public Health Department and on this occasion all the figures and tables are for a complete year. I am sometimes tempted and have not always resisted the temptation to refer to matters of topical interest which have occurred outside the time limit of this annual review, which by force of circumstance is always at least six months in arrear on the year it is concerned with but on the whole I think it is better to confine my comments strictly to the events of its title page. Therefore I shall not make any reference to the controversial subject of Fluoridation but relegate this to next year's report when it is to be hoped the matter will be decided one way or the other. I would, however, like to make one comment : if the opponents of this measure on the so called ethical grounds showed the same amount of zeal in promoting a scheme for discouraging parents from their all too often lavish expenditure on sweets for their offspring, which is the only alternative to flouridation, it would show a positive interest in the vital problems of dental decay in young children.

### Vital Statistics.

The Registrar General's estimate of the mid-1962 population (71,980) falls short by something under 1,000 of the actual census figure for 1961, but in as much as his estimate for that year fell short

by a similar amount from the actual figure it is not necessary to be too pessimistic about Hove's diminishing population. It does not resolve entirely the mystery of why with all these new units of accommodation being provided the population is virtually stationary, but with deaths doubling the births it is obvious that immigration must largely exceed emigration if a steady increase is to be maintained every year and with the prospect of high and higher rates and increased fares the outlook for South Coast towns is not exactly rosy.

Birth, Death and Infant Mortality Rates show very little change—Illegitimate Live Birth and Still Birth Rates shows some increase but Illegitimate Death Rates show a decrease in both the Neonatal (deaths under one month) and Early Neonatal (deaths under one week). Heart and Circulatory Disease show the highest incidence amongst the causes of death in adults with Cancer coming second. Malignant disease of the lung shows a slight decrease. As analysis of the 14 deaths occurring in infants under the age of one year shows that nearly half were due to Prematurity and a further third to Congenital defects.

### **Infectious Disease (including Tuberculosis)**

The table on page 23 shows that with the exception of Measles which showed a very considerable drop from 1961, the figures are very comparable. There was one case of Diphtheria reported in a residential school and all the measures necessary to confine its spread were at once put into action. Subsequent laboratory investigation proved ultimately that the germ was not in fact virulent and that therefore the child was not suffering from Diphtheria. Such laboratory investigation takes time and one has to act at once on suspicion whilst awaiting bacteriological confirmation. One good result of this "false alarm" was to enable us to obtain up to date information about the state of immunity of pupils in the many private schools in Hove and to arrange for a more close supervision over its maintenance.

The Tuberculosis Register shows very little variation from year to year and such variations are due to the balance of inward and outward transfers and the deaths and not to a rising incidence of new cases.

### **Atmospheric Pollution**

The Joint Committee on Atmospheric Pollution continued its discussion with the South Eastern Gas Board concerning the height of the coke dump mentioned in last year's report. In the early autumn the height of the dump decreased at any rate vertically and thereafter complaints diminished. A review of the results of the analysis of the grit deposit gauges throughout the year show that since 1958-59 the levels have remained stationary with occasional fluctuations due to rainfall and wind variations and are in fact below comparable similar sites in other parts of the country.

## Survey of Basement Accommodation

In the Autumn I reported the completion of the original survey of basements comprising Waterloo Street, Upper Market Street, Lower Market Street, Brunswick Terrace and Brunswick Square. One hundred units of accommodation in the 1959-61 Building Programme had been allocated to the rehousing of families for unfit basements from those areas and the result was :—

Referred to Housing Dept. for rehousing				100 (including 13 from Priority Housing List)
Withdrawn applications	..	..	50	
Rehoused	..	..	19	
Doubtful cases	..	..	13	
Awaiting rehousing	..	..	5	

From that date onward the revised procedure accepted by the Council has been put into effect, i.e. that basements in Holland Road, Lansdowne Street, Place and Road, Farm Road, Brunswick Place, Cambridge Road, Brunswick Road and York Road are reviewed but only the worst dealt with immediately. In addition families in bad basements in other parts of the town outside the survey area can be rehoused from the original allocation of new dwellings.

## Housing Act 1961

This act made further arrangements in regard to the financial assistance for the provision of housing accommodation, allowed greater increases in permitted rents for improvements, altered the provisions under which grants are given for improvements, and generally gave more powers to Local Authorities in respect of mandatory and permissive requirements.

The act particularly conferred further powers on Local Authorities as regards houses let in lodgings or occupied by members of more than one family and a circular issued by the Ministry of Housing and Local Government on the 5th April, 1962, explains the main features of the new provisions and gives general guidance on their application.

The powers fall into four main groups :—

(i) An entirely new power to apply a code of management to individual houses in which proper standards of management have not been observed. The requirements for this code are prescribed in the Housing (Management of Houses in Multiple Occupation) Regulations 1962 which came into operation on 22nd May, 1962.

(ii) Stronger powers to require the provision of additional facilities and amenities essential to decent living conditions, and the provision of adequate means of escape from fire.



(iii) A new power for local authorities to carry out works themselves in default and recover the cost.

(iv) A power, also new, to make a direction limiting the number of persons who may live in a house, or part of a house, which is in multiple occupation.

Failure to comply with the management regulations or with a direction is punishable on summary conviction to penalties ranging from up to £20 for a first offence to a maximum of £100 and three months imprisonment for second and subsequent offences.

The circular states that wherever possible the aim should be to achieve in suitable houses a thoroughgoing conversion at standards which will attract improvement grants. It is accepted however that not all houses will be suitable for this treatment and not all owners will be willing or able to undertake such extensive work.

It is suggested that discussions should take place with the owners to adopt an approved standard and that the Local Authority should not hesitate to make grants or to accept the rehousing of families in suitable cases.

In order to carry out these provisions of the act relating to houses in multiple occupation, it was felt that in view of the rate of conversion of existing houses, and the extent and varied type of house so used in this area, that it would be necessary to have, for the purpose of guidance, standards providing a sufficiency of space, sanitary and domestic facilities, lighting and means of escape in case of fire.

It was felt that it was reasonable in the case of new buildings or conversions that a high standard was necessary and that in the case of existing multiply occupied dwellings a relaxed standard, yet allowing for the availability and accessibility of all facilities, could be adopted. The Council adopted such standards for the purpose of guidance, and architects, surveyors and solicitors practising in property have been supplied with copies of these standards.

Instructions have not been given at this stage for a survey to be carried out to implement these standards but cases brought to the notice of the Local Authority will be dealt with as they arise. The provisions have already had considerable effect in checking the growth of this problem, insomuch as properties becoming vacant require to comply with the standards before becoming re-occupied.

Co-operation with architects, surveyors and estate agents in these cases is good, and, as is the case in the basement programme, agreements are finalised before plans are submitted.

With regard to houses already in multiple occupation, progress in the absence of a survey as carried out in connection with basements, is necessarily slow and it remains to be seen if the Ministry at a later date will consider it necessary to implement the requirements by mandatory action.

## Miscellaneous

In 1962 the Council adopted Model Byelaws in relation to Hairdressers' and Barbers' businesses. The clauses deal with the cleanliness of the premises and fittings, removal of litter, the wearing and use of clean equipment and the protection of any sore or boil on the skin of exposed parts. As the result of visits to and inspection of premises in the borough, it can be said that most are now conducted in a hygienic manner, although on the men's side the problem of cleansing hair brushes between successive customers has not always been satisfactorily solved.

The implementation of the Public Health Act, 1961, imposed new duties and provided more powers to the Public Health Committee in several directions. These included expedited procedure for remedying stopped up drains within 48 hours and for repairing drains and private sewers within seven days ; defective premises and sanitation and verminous premises can be dealt with more effectively. In connection with prevention and notification of Infectious Disease, a magistrate can order the compulsory examination of a person suspected of suffering from an infectious disease, the owner of premises can be required to disclose information about a tenant suffering from Infectious Disease, children under 16 can be excluded from places of entertainment or assembly and a person can be requested to discontinue his work if it is considered necessary to prevent the spread of notifiable disease but if he agrees the Local Authority must pay compensation. Under another section of the new Act the Local Authority has power to require the owner or occupier of any inn, public house, refreshment or place of public entertainment to provide and maintain sanitary conveniences for the use of its patrons. One difficulty is in respect of licenced premises where the views of the Council and Magistrates may differ and in order to gain information as to the present position in cafes and restaurants a questionnaire was issued during the year to all occupants of premises coming within these categories. It was obvious after its completion and examination that it was impossible to lay down fixed standards and that each set of premises must be dealt with according to the particular circumstances.

## Conclusion.

I would like to refer to the very great help which once again I have received from all members of the staff and particularly to their support in the difficult time following on Dr. Martin's death and before his replacement. Mr. Churcher, the Chief Public Health Inspector, retired in April 1962 after 38 years unstinted service with the Public Health Department and the Borough. I had learned to rely on his great experience and sound judgment in all matters affecting the sanitary side and in particular I would mention the very valuable pioneer work he did in connection with the Basement Survey. His place has been taken by Mr. Dransfield, who has had the advantage



of a long apprenticeship in the Department and has already proved himself a very worthy successor to his old Chief. There was considerable delay in the appointment of a new Deputy Medical Officer of Health, but Dr. MacLennan arrived from Scotland in December.

I would also like to thank the Chairman and members of the Public Health Committee for their forbearance, kindness and support during a particularly difficult year.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

N. E. CHADWICK,

*Medical Officer of Health.*

**PART I**  
**VITAL AND GENERAL STATISTICS**

## VITAL AND GENERAL STATISTICS 1962

Area	..	..	..	(Acres)	4,010 $\frac{3}{4}$
Resident Population (Mid-1962)	..	..	..		71,980
Population 1951 Census	..	..	..		69,435
Population 1961 Census :—					
Male	..	..	..	29,929	
Female	..	..	..	42,914	
				—————	72,843
Rateable Value (1st April, 1962)	..	..	..	£1,950,874	
Sum represented by a penny rate	..	..	..	£7,923	
				M.	F.
<b>Deaths</b>	..	..	1514	625	889
Death rate :	21.04 (Standard)				
Death rate :	12.83 (Corrected).				
Deaths from Cancer	..	..		255	
Deaths from Measles	..	..		Nil.	
Deaths from Whooping Cough	..	..		Nil.	
<b>Mothers and Infants.</b>					
Live Births :		770		402	368
Rate per 1,000 population	10.69 (Standard)			..	
	12.50 (Corrected)			..	
Illegitimate Live Births (Per cent of total live births)				12.46	
Stillbirths :				15	
Rate per 1,000 total live and still births	..			19.10	
Total Live and Still Births :				785	
Infant Deaths (deaths under one year)	..			14	
Infant Mortality Rates :					
Total Infant deaths per 1,000 total live births				18.18	
Legitimate infant deaths per 1,000 leg. live births				16.32	
Illegitimate infant deaths per 1,000 ill. live births				31.25	
Neo-natal Mortality Rate : (deaths under four weeks per 1,000 total live births)	..	..		11.68	
Early neo-natal Mortality Rate (deaths under one week per 1,000 total live births)	..	..		11.68	
Perinatal Mortality Rate (still-births and deaths under one week combined per 1,000 total live and still-births)				30.57	
Maternal Mortality (including abortion) :					
Number of deaths	..	..		—	
Rate per 100 total live and still-births	..	..		—	

## PREMATURE BIRTHS.

Number of Premature Live Births notified (as adjusted by any notifications transferred in or out of the area) :

(a)	In Hospital	..	..	49	
(b)	At Home	..	..	8	
(c)	In Private Nursing Homes	..		1	Total 58

Number of Premature Stillbirths notified (as adjusted by any notifications transferred in or out of the area) :

(a)	In Hospital	..	..	8	
(b)	At Home	..	..	—	
(c)	In Private Nursing Homes	..		—	Total 8

Weight at Birth	Premature Live Births															Premature Still-births		
	Born in Hospital			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in Nursing Home and nursed entirely there			Born in Nursing Home and transferred to hospital on or before 28th day			Born in Hospital (17)	Born at Home (18)	Born in Nursing Home (19)
	Total (2)	Died within 24 hrs. of birth (3)	Survived 28 days (4)	Total (5)	Died within 24 hrs. of birth (6)	Survived 28 days (7)	Total (8)	Died within 24 hrs. of birth (9)	Survived 28 days (10)	Total (11)	Died within 24 hrs. of birth (12)	Survived 28 days (13)	Total (14)	Died within 24 hrs. of birth (15)	Survived 28 days (16)			
(1)																		
(a) 3lb. 4oz. or less (1,500 gms. or less)	5	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(b) Over 3lb. 4oz. up to and including 4lb. 6oz. .. (1,500—2,000 gms.)	17	2	15	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—
(c) Over 4lb. 6oz. up to and including 4lb. 15oz. .. (2,000—2,250 gms.)	8	—	8	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(d) Over 4lb. 15oz. up to and including 5lb. 8oz. .. (2,250—2,500 gms.)	19	—	19	8	—	8	—	—	—	—	1	—	—	—	—	1	—	—
Totals ..	49	7	42	8	—	8	—	—	—	—	1	—	1	—	—	8	—	—



# DEATHS—1962. HOVE.

<i>Causes</i>			<i>Males</i>	<i>Females</i>
1.	Tuberculosis—Respiratory ..	..	7	1
2.	Tuberculosis—Other ..	..	—	—
3.	Syphilitic Disease ..	..	1	2
4.	Diphtheria ..	..	—	—
5.	Whooping Cough ..	..	—	—
6.	Meningococcal Infections ..	..	—	—
7.	Acute Poliomyelitis ..	..	—	—
8.	Measles ..	..	—	—
9.	Other Infective and Parasitic Diseases ..	..	2	—
10.	Malignant Neoplasm, Stomach ..	..	8	20
11.	Malignant Neoplasm, Lung, Bronchus ..	..	46	14
12.	Malignant Neoplasm, Breast ..	..	1	31
13.	Malignant Neoplasm, Uterus ..	..	—	12
14.	Other Malignant & Lymphatic Neoplasms ..	..	36	87
15.	Leukaemia, Aleukaemia ..	..	3	4
16.	Diabetes ..	..	6	4
17.	Vascular Lesions of Nervous System ..	..	84	166
18.	Coronary Disease, Angina ..	..	155	132
19.	Hypertension with Heart Disease ..	..	7	19
20.	Other heart disease ..	..	68	148
21.	Other Circulatory Disease ..	..	37	37
22.	Influenza ..	..	2	3
23.	Pneumonia ..	..	28	64
24.	Bronchitis ..	..	36	19
25.	Other Diseases of Respiratory System ..	..	9	5
26.	Ulcer of Stomach and duodenum ..	..	6	5
27.	Gastritis, Enteritis and Diarrhoea ..	..	2	7
28.	Nephritis and Nephrosis ..	..	4	5
29.	Hyperplasia of prostate ..	..	7	—
30.	Pregnancy, Child birth, Abortion ..	..	—	—
31.	Congenital Malformations ..	..	3	5
32.	Other Defined and ill-defined diseases ..	..	38	49
33.	Motor Vehicle Accidents ..	..	5	6
34.	All other accidents ..	..	19	34
35.	Suicide ..	..	5	10
36.	Homicide and Operations of War ..	..	—	—
Totals ..			625	889
			<b>TOTAL</b>	<b>1,514</b>

## DEATHS DUE TO VIOLENCE.

Male	..	..	..	29
Female	..	..	..	50
Total :				<hr/> 79 <hr/>

Classification :		<i>Male</i>	<i>Female</i>	<i>Total</i>
Motor Vehicle Accidents	..	5	6	11
All other accidents	..	19	34	53
Suicide	.. ..	5	10	15
Homicide & Operations of War		—	—	—
		<hr/> 29 <hr/>	<hr/> 50 <hr/>	<hr/> 79 <hr/>

THE PRINCIPAL CAUSES OF DEATHS DURING THE YEAR.

HEART DISEASE.	603
CANCER.	255
VASCULAR LESIONS OF NERVOUS SYSTEM.	250
PNEUMONIA.	92

DEATHS FROM CANCER (ALL FORMS) OVER PAST 10 YEARS.

Year	Population	Total Deaths
1953	69,370	207
1954	69,490	217
1955	69,580	211
1956	69,700	206
1957	69,620	235
1958	69,790	232
1959	69,930	236
1960	69,870	214
1961	71,640	257
1962	71,980	255

The following table shows the localisation of the disease in the case of the 255 deaths recorded in 1962.

Localisation	No. of deaths		
	Male	Female	Total
Stomach .. ..	8	20	28
Lungs .. ..	46	14	60
Breast .. ..	1	31	32
Uterus .. ..	—	12	12
Other and unspecified organs ..	36	87	123

# DEATHS OF INFANTS UNDER ONE YEAR OF AGE OVER THE PAST 10 YEARS.

Year	Male	Female	Total
1953	3	6	9
1954	3	5	8
1955	3	4	7
1956	8	6	14
1957	7	7	14
1958	13	2	15
1959	3	4	7
1960	5	6	11
1961	7	7	14
1962	10	4	14

## CAUSES OF DEATHS OF CHILDREN UNDER ONE YEAR OF AGE.

Premature Births	..	..	6
Pneumonia	..	..	2
Heart Disease	..	..	2
Acute Hepatitis	..	..	1
Anaemia ..	..	..	1
Asphyxia ..	..		2
			<hr/> 14 <hr/>

**PART II**  
**INFECTIOUS DISEASES.**



TUBERCULOSIS—1962.

	New Cases				Inward Transfers				Deaths				Other Removals				Cases on Register				1961	
	Pul		Non-Pul		Pul		Non-Pul		Pul		Non-Pul		Pul		Non-Pul		Pul		Non-Pul			
Under 1																					Totals	
1— 5	1	1																				
5—10																					3	
10—15		1																				
15—20		1																				
20—25	1	2																				
25—35	1																					
35—45	1	5																				
45—65	6	2																				
Over 65	3																					
Totals	13	12	—	1	22	25	—	—	11	3	—	—	18	9	—	2	373	276	24	40	713	683

INFECTIOUS DISEASE - 1962  
DISEASES NOTIFIED DURING THE YEAR.

DISEASE.			TOTAL CASES NOTIFIED.	
			1961	1962
Scarlet Fever	..	..	18	10
Whooping Cough	..	..	44	48
Measles	..	..	609	93
Dysentery	..	..	3	8
Pneumonia	..	..	26	15
Erysipelas	..	..	6	6
Puerperal Pyrexia	..	..	1	—
Food Poisoning	..	..	4	—
Erysipelas	..	..	6	—

**Poliomyelitis :**

There were no cases of Poliomyelitis notified in the Borough during 1962.

**Scarlet Fever :**

Ten cases were notified during 1962.

1960 — 52 : 1961 — 18 : 1962 — 10

Distribution of Scarlet Fever cases by age group and sex.

Age Group	M.	F.	Total
1—4 years .. ..	—	—	—
5— 9 years .. ..	1	6	7
10—14 years .. ..	—	3	3
15—24 years .. ..	—	—	—
25 plus years .. ..	—	—	—
	1	9	10

**Whooping Cough :**

Forty-eight cases were notified during 1962.

1960 — 54 : 1961 — 44 : 1962 — 48

Distribution of Whooping Cough cases by age group and sex.

Age Group	M.	F.	Total
Under 1 year .. ..	3	2	5
1 year .. ..	—	1	1
2 years .. ..	—	5	5
3 years .. ..	4	3	7
4 years .. ..	—	1	1
5— 9 years .. ..	10	12	22
10—14 years .. ..	1	2	3
15—24 years .. ..	—	1	1
25 plus years .. ..	1	2	3
	19	29	48

**Measles :**

Ninety-three cases were notified during 1962.

1960 — 301 : 1961 — 609 : 1962 — 93

**Sonne Dysentery :**

Eight cases were notified during 1962.

1960 — 29 : 1961 — 3 : 1962 — 8

**Pneumonia :**

Fifteen cases notified during 1962.

1960 — 19 : 1961 — 26 : 1962 — 15

Distribution of pneumonia cases by age group and sex.

Age Group	M.	F.	Total
Under 1 year .. ..	1	—	1
1—10 years .. ..	—	1	1
11—20 years .. ..	—	—	—
21—40 years .. ..	—	1	1
41—50 years .. ..	—	—	—
51—60 years .. ..	3	1	4
61—70 years .. ..	1	2	3
71—80 years .. ..	1	2	3
81—90 years .. ..	—	1	1
90 plus years .. ..	—	1	1
	6	9	15

**Erysipelas :**

Six cases notified during 1962.

1960 — 12 : 1961 — 6 : 1962 — 6

Distribution of erysipelas cases by age group and sex.

Age Group	M.	F.	Total
1—10 years .. ..	—	—	—
11—20 years .. ..	—	—	—
21—50 years .. ..	—	2	2
51—70 years .. ..	—	2	2
71—90 years .. ..	—	2	2
91 plus years .. ..	—	—	—
	—	6	6

**Food Poisoning :**

No cases notified during 1962.

1960 — 4 : 1961 — 4 : 1962 — Nil

**Puerperal Pyrexia :**

No cases notified during 1962.

1960 — 5 : 1961 — 1 : 1962 — Nil

## VENEREAL DISEASES.

Statement of cases admitted to the Brighton V.D. Clinic from the Hove Area for the year 1st January, 1962—31st December, 1962.

			Patients transferred to the Hove Area from other V.D. Clinics			
<u>Syphilis</u>			<i>Male</i>	<i>Females</i>	<i>Male</i>	<i>Females</i>
Primary	..		1	—	1	—
Neuro	..		1	—	1	—
			<hr/>		<hr/>	
			2	—	2	—
Less transferred from Other Clinics	..		<hr/>		<hr/>	
			2	—		
			<hr/>		<hr/>	
			—	—		
			<hr/>		<hr/>	
<u>Gonorrhoea</u>	..		32	8		
			<hr/>		<hr/>	
 <u>Other Conditions.</u>						
Non-gonococcal urethritis	..		37	—		
Requiring treatment			25	26		
Not requiring treat- ment	..		31	30		
			<hr/>		<hr/>	
			93	56		
			<hr/>		<hr/>	



**PART III.**  
**SANITARY CIRCUMSTANCES**  
**OF THE AREA.**

# SANITARY INSPECTION OF THE DISTRICT

## ANNUAL STATEMENT OF THE CHIEF

### PUBLIC HEALTH INSPECTOR FOR THE YEAR 1962.

Total number of Houses inspected (under Public Health or Housing Acts)	..	..	..	763
Total number of Revisits	..	..	..	1586
Total number of Inspections made for the purpose	..			793
Number of Houses inspected found with defects	..			225
Number of Informal Notices served	..	..		179
Number of Statutory Notices served	..	..		6
Number of Premises inspected (other than houses) from complaints of nuisances, etc.	..	..		118
Number of Inspections made for the purpose	..			186
Number of Revisits	..	..	..	333
Number of Premises inspected in which nuisances were found	..	..	..	54
Number of Informal Notices served	..	..		30
Number of Statutory Notices served	..	..		6

#### Dairies and Milkshops.

Number of Inspections of Dairies	..	..		84
Number of Inspections of Milkshops	..	..		80

#### Food Hygiene Regulations.

Number of Shops inspected in respect of Meat	..			563
Ice Cream	..	..	..	167
Fish	..	..	..	282
Grocery, Provisions, etc.	..	..	..	544
Cafes, Restaurants, Kitchens, etc.	..	..		416
Other Shops	..	..	..	349
Bakehouses	..	..	..	96
Informal Notices served	..	..	..	12

#### Shops Act, 1950.

Number of Shops inspected	..	..	..	350
Number of Notices served. Informal	..	..		1

### **Stables.**

Number of Stable inspections	..	..	31
Number of Notices served. Informal	..	..	<i>Nil</i>
Statutory	..	..	<i>Nil</i>

### **Vermin (Bugs).**

Number of visits regarding verminous premises	..	12
Number of visits regarding disinfestation of rooms	..	2
Number of rooms treated for vermin	..	2

### **Drains.**

Number of drains completely renewed	..	1
Number of drains partly repaired	..	9
Number of visits during reconstruction or repair	..	72

### **Illness.**

Number of visits in respect of illness. Infectious	..	24
Non-infectious	..	9
Number of visits in respect of Tuberculosis	..	5

### **Miscellaneous.**

Number of Sundry visits	..	370
Number of visits respecting Unsound Food	..	93
Number of visits respecting Searches	..	172

### **Table of Defects.**

Number of soil and vent pipes, W.C's, sinks and waste pipes	41
Number of gutters and rain water pipes	28
Number of structural defects to walls, floors, ceilings, doors, windows, grates, stairs and handrails	87
Number of roofs, chimneys, yard paving, steps and areas	47
Number of dustbins, ashpits	41
Number of cases of dampness	50
Number of accumulations of manure, refuse, etc.	23
Number of animal nuisances	12
Number of defective water supply	5
Number of choked drains	40
Number of bakehouses limewashed	2

## HOUSING STATISTICS FOR THE YEAR 1962.

Number of new houses erected during the year :

(a)	By Private Enterprise	..	63
	New Flats	..	313
	Additional Dwellings by conversion into Flats	..	130
(b)	By Local Authority		
	Houses	..	22
	Flats	..	130
	Conversions	..	10

## RENT ACT, 1957.

Number of Applications for a Certificate of Disrepair	..	1
Number of Undertakings given by the Owner	..	1
Number of Certificates Cancelled..	..	<i>Nil</i>
Number of Applications Refused	..	<i>Nil</i>

## THE TOTAL NUMBER OF FAMILY UNITS OF ACCOMMODATION IN ALL PROPERTIES AT 31st DECEMBER, 1962.

### Council Built :

Houses	..	1318
Flats	..	932
Old Peoples Flats	..	191
		—————
		2441

### Purchased Property :

Houses	..	59
Flats	..	171
Old Peoples Flats	..	40
		—————
		270

2711

## THE PRESENT POSITION (31.12.62) AS TO OUTSTANDING APPLICATIONS FOR ACCOMMODATION IS AS FOLLOWS :

One or more Adults	..	28
Man and wife only	..	23
Man, wife and 1 child	..	86
Man, wife and 2 children	..	56
Man, wife and 3 children	..	20
Man, wife and 4 or more children..		14
Aged persons	..	104
		—————
		331

# **UNDERGROUND ROOM REGULATIONS—REVIEW FOR THE YEAR 1962.**

I. BASEMENTS CLOSED.				South Eastern Area	Other Premises	Total
				<hr/>		
Closing Orders made during 1961..				9	38	47
Undertakings accepted during 1961				9	22	31
<hr/>				<hr/>		
Totals ..				18	60	78
<hr/>				<hr/>		
Closing Orders determined during 1961 .. ..				11	12	23
Undertakings cancelled during 1961 (Formal and Informal) ..				13	19	32
<hr/>				<hr/>		
Totals ..				24	31	55
<hr/>				<hr/>		
II. BASEMENTS MADE FIT FOR HABITATION						
				26	70	96
<hr/>						
III. BASEMENT DWELLINGS INSPECTED AND SUBSE- QUENTLY REPORTED TO THE PUBLIC HEALTH COMMITTEE						
Vacant or De-requisitioned ..				39		
Building Plans .. ..				115		
South Eastern Survey Area ..				57		
Occupied Basement Premises ..				10		
Re-housing applications ..				37		
Action taken under Section 9 ..				—		
<hr/>				<hr/>		
Total ..				258		
<hr/>				<hr/>		
Number of visits for inspections discussions and inspection of works .. ..				1008	2029	3037
<hr/>						

# **FACTORIES ACT, 1937.**

INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors).

Premises.	M/c Line No.	Number on Register	Number of		
			Inspections	Written notices.	Occupiers prosecuted.
(i) Factories in which Sections 1, 2, 3, 4 and 6 are enforced by Local Authorities ..	1	63	72	—	<i>Nil</i>
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority .. ..	2	234	278	9	<i>Nil</i>
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises) ..	3	2	2	—	<i>Nil</i>
TOTAL .. ..		297	352	9	<i>Nil</i>



CASES IN WHICH DEFECTS WERE FOUND.

Particulars	M/c Line No.	Number of cases in which defects were found.				No. of cases in which prosecutions were instituted
		Found	Remedied	To H.M. Inspector	Referred By H.M. Inspector	
Want of Cleanliness (S. 1) ..	4	—	—	—	—	—
Overcrowding (S. 2) ..	5	—	—	—	—	—
Unreasonable temperature (S. 3)	6	—	—	—	—	—
Inadequate ventilation (S. 4) ..	7	—	—	—	—	—
Ineffective drainage of floors (S. 6)	8	—	—	—	—	—
Sanitary Conveniences (S. 7)	9	3	3	—	—	—
(a) insufficient ..						
(b) unsuitable or defective ..						
(c) not separate for sexes ..	11	1	1	—	—	—
Other offences against the Act (not including offences relating to Outworkers) ..	12	—	—	—	—	—
TOTAL ..		8	8	—	—	—

# OUTWORKERS.

## Sections 110 and 111.

Nature of Work	M/c Line No.	Section 110			Section 111		
		No. of outworkers in August list required by Sect. 110 (1) (c).	No. of cases of default in sending list to the Council.	No. of prosecutions for failure to supply lists.	No. of instances of work in unwhole- some premises.	Notices Served.	Prosecutions
Wearing Apparel, Making, Altering, etc.	13	11	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>
Furniture and Upholstery	18	6	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>
TOTAL		17	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>	<i>Nil</i>

## FOOD AND DRUGS ACT.

### Formal Samples.

Pasteurised Milk	..	..	12
T.T. Pasteurised Milk		..	7
Sterilised Milk	..	..	3
T.T. Milk	..	..	2

### Informal Samples.

Pork Sausages	..	..	9
Rock	..	..	1
Dates	..	..	1
Custard Pastry	..	..	1
Cornflour	..	..	1
Angel Bar Mix	..	..	1
Scone Mixture	..	..	1
Macaroon Mix	..	..	1
Sausage Filling	..	..	2
Steak and Kidney Filling		..	2
Sausage Roll	..	..	1
Dessicated Coconut		..	2
Butter Cream	..	..	2
Synthetic Cream	..	..	2
Pie Jelly Filling	..	..	1
Pork Pie Meat	..	..	1
Beef Sausage Meat	..	..	1
Pork Sausage Meat	..	..	1
Beef Sausages	..	..	2
Celery Creams		..	1
Pure Sherry Essence		..	1
Potted Beef with Butter		..	1
Casserole Steak	..	..	1
Dairy Cream	..	..	1
White Pepper	..	..	1
Ice Cream	..	..	8
Bread	..	..	5
Lemon Drink	..	..	1
Chocolate	..	..	1
Mixture for Rheumatism		..	1

Four samples of sausages contained preservatives without declaration.

Sample 439—Casserole Steak : containing Meat (including fat) 63%, Water 33%, Flour, Salt and Pepper 4%.

During the year the Food Standards Committee issued a report on canned meat which recommended designation and labelling of different canned meats, together with standards of meat content. No action has yet been taken by the Ministry to introduce this in legislation, and it remains at present as a desirable guide. In this particular case action had been taken by one Authority on a comparable sample without success, and no further action was recommended. Further samples are to be taken and this range of products is to be kept under observation.

Sample 438—Mixture for Rheumatism : Analyst suggests re-wording of misleading label.

### **Bacteriological Examination of Frozen Egg.**

Samples of frozen egg were taken, in co-operation with the Public Health Laboratory Service, following outbreaks of illness associated with such products. Unsatisfactory stocks were withdrawn from this area for the purpose of pasteurisation before re-issue. In view of the wide-spread suspicion attached to these products, it is gratifying to know that almost all stocks sold in this area are now pasteurised.

Number of samples taken	..	12
Number of satisfactory samples	..	9

The reports on the three unsatisfactory samples were as follows:—

Sample 299—Staph. pyogenes (Coagulase Positive) isolated.

Sample 311—Staph. pyogenes (Coagulase Positive) isolated, typed

3C/55/71.

Sample 416—Salm. Meleagridis isolated.

### **PROSECUTIONS**

A prosecution was taken against an owner of two dwelling houses for failing to comply with court orders for works to be done.

A plea of Guilty was entered in each case and a fine of £2 was imposed in each case.

A prosecution was taken against the proprietor of a Pet shop under the Pet Animals Act 1951 for failing to keep a pet shop in a state of cleanliness.

A plea of guilty was entered and a fine of £5 was imposed.



## EXAMINATION OF ICE CREAM

Number of samples taken ..	8
All satisfactory.	

## RATS AND MICE.

During the year the rodent operators made 4,336 visits for the eradication of rats and mice, treatment being carried out at 456 premises.

Treatment was also carried out in all the sewers of the Borough, involving at least two visits to 1,529 manholes.

In addition, a number of faulty drains were found during rat investigations, and repaired.

## SALE OF MILK UNDER SPECIAL DESIGNATION

Licences issued during the previous year are valid for a period of five years. Licences were granted for 1962 as follows :—

For the sale of Tuberculin Tested	
Milk .. .. .	29
For the sale of Pasteurised Milk ..	18
For the sale of Sterilised Milk ..	5

The total number of licences is as follows :—

Pasteurisers Licence .. .. .	1
For the sale of T.T. Milk ..	131
For the sale of Pasteurised Milk ..	121
For the sale of Sterilised Milk ..	54

The largest proportion of milk now sold in shops is Tuberculin Tested Pasteurised Milk, although Pasteurised Milk is available on ordinary delivery services.

## SAMPLES OF DESIGNATED MILK TAKEN DURING THE YEAR.

Tuberculin Tested Milk (Farm Bottled)	159
Tuberculin Tested Pasteurised Milk	80
Channel Island Pasteurised Milk ..	72
Pasteurised Milk .. .. .	95
Sterilised Milk .. .. .	23

### Samples which did not comply with the Conditions.

Tuberculin Tested Milk ..	12
Tuberculin Tested Pasteurised Milk	1
Channel Island Pasteurised Milk ..	2
Pasteurised Milk .. .. .	1

(These samples failed on the Methylene Blue Tests.)

## BIOLOGICAL EXAMINATION OF MILK.

Tuberculin Tested Milk	..	77
Tuberculin Tested Channel Island Milk		15
Non-Designated Milk	..	19

These samples were taken at the Dairy prior to treatment by Pasteurisation. One sample was found to contain Tubercle by Guinea Pig inoculation.

## NUMBER OF FOOD PREMISES.

Grocers and Provision Merchants		137
Confectioners	.. ..	135
Greengrocers	.. ..	71
Butchers and Cooked Meat	..	54
Delicatessen	.. ..	3
Bakers	.. ..	30
Fishmongers (including fried fish)		23
Restaurants and Cafes	..	63
Chemists	.. ..	30
Canteens	.. ..	26
Wine Stores	.. ..	21
Pie Manufacturer	.. ..	1
Tea and Coffee Importers	..	1
Biscuit Shop	.. ..	1
Confectionery Manufacturers	..	2
Kiosks	.. ..	4
Beer Bottling Store	.. ..	2
Wholesale Grocers	.. ..	3
Poulterers	.. ..	2
Hotels	.. ..	31
Public Houses	.. ..	27
Dairies	.. ..	13
Coffee Stall	.. ..	1
Brewery	.. ..	1



# BACTERIOLOGICAL EXAMINATIONS OF THE SWIMMING BATH WATER AT THE KING ALFRED.

## Small Swimming Bath.

Date	Plate Count Yeastrel Agar 1 day at 37° C.	Probable Number of Coliform Bacilli,	Faecal
	Aerobically	2 days at 37° C.	
15th Jan.	Less than 1 per ml.	Less than 1 per 100 ml.	
23rd Jan.	Less than 1 per ml.	Less than 1 per 100 ml.	
30th Jan.	5 per ml.	Less than 1 per 100 ml.	
14th Feb.	Less than 1 per ml.	Less than 1 per 100 ml.	
20th Feb.	Less than 1 per ml.	Less than 1 per 100 ml.	
13th March	Less than 1 per ml.	Less than 1 per 100 ml.	
21st March	2 per ml.	Less than 1 per 100 ml.	
10th May	17 per ml.	35 per 100 ml.	35 per 100 ml.
16th May	1 per ml.	1 per 100 ml.	1 per 100 ml.
9th July	2 per ml.	Less than 1 per 100 ml.	
27th August	1 per ml.	Less than 1 per 100 ml.	
16th October	2 per ml.	1 per 100 ml.	1 per 100 ml.

# BACTERIOLOGICAL EXAMINATION OF THE SWIMMING BATH WATER AT THE KING ALFRED.

## Large Swimming Bath.

Date	Plate Count Yeastrel Agar 1 day at 37° C. Aerobically	Probable Number of Coliform Bacilli, 2 days at 37° C.	Faecal
25th, April	2 per ml.	Less than 1 per 100 ml.	
10th May	Less than 1 per ml.	Less than 1 per 100 ml.	
16th May	Less than 1 per ml.	Less than 1 per 100 ml.	
9th July	3 per ml.	Less than 1 per 100 ml.	
27th August	1 per ml.	Less than 1 per 100 ml.	
24th Sept.	3 per ml.	Less than 1 per 100 ml.	

The large swimming bath is used as such for the period from Easter until the end of September.

## FOOD CONDEMNED DURING THE YEAR 1962

### Home Killed Meat.

Fillet Steaks	..	..	..	3 lbs.
Ham ..	..	..	..	15 lbs.
Bacon ..	..	..	..	6 lbs.
Ox Kidney	..	..	..	30 lbs.

### Poultry.

Chicken	..	..	..	24 lbs.
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### Miscellaneous Meat Products.

Pork Pies	..	..	..	13
Sausage Rolls	..	..	..	10

### Tinned Meat.

Tongue	..	..	..	45 lbs.
Ham ..	..	..	..	231 lbs. 15 ozs.
Jellied Veal	..	..	..	36 lbs.
Corned Beef	..	..	..	519 lbs. 6 ozs.
Irish Stew	..	..	..	9 tins
Luncheon Meat	..	..	..	195 lbs. 1½ ozs.
Minced Beef Loaf	..	..	..	2 lbs. 4 ozs.
Stewed Steak	..	..	..	56 lbs. 7 ozs.
Minced Beef	..	..	..	1 tin
Pork ..	..	..	..	12 lbs.
Brisket ..	..	..	..	10 lbs.
Steak Pudding	..	..	..	3 lbs. 8 ozs.
Turkey	..	..	..	12 ozs.
Beef Curry	..	..	..	1 lb.
Bacon Pudding	..	..	..	8 ozs.
Vienna Steaks	..	..	..	8 ozs.
Hamburgers	..	..	..	8 lbs.
Meat Gravy	..	..	..	1 tin
Smoked Fare	..	..	..	24 lbs.
Pork Brawn	..	..	..	2 lbs.

## Wet Fish.

Bream ..	..	..	..	3 stone
Roes ..	..	..	..	4 stone
Haddock	..	..	..	7 stone
Sole	..	..	..	2 stone
Scampi	..	..	..	2 stone
Herrings	..	..	..	2 stone
Plaice ..	..	..	..	3 stone
Salmon	..	..	..	7 lbs.
Halibut	..	..	..	41 lbs.
Cod ..	..	..	..	2 stone

## Frozen Food.

Frozen Peas	..	..	..	295 packets
Spinach	..	..	..	8 packets
Fish Sticks	..	..	..	85 packets
Fish Cakes	..	..	..	54 packets
Mousse..	..	..	..	92 packets
Stew ..	..	..	..	3 packets
Beef Steak Dinner		..	..	11 packets
Roast Beef Dinner	..	..	..	10 packets
Steak and Kidney	..	..	..	10 packets
Chicken	..	..	..	7
Broad Beans	..	..	..	3 packets
Kippers	..	..	..	3 packets
Chips ..	..	..	..	4 packets
Plaice ..	..	..	..	15 packets
Puff Pastry	..	..	..	18 packets
Arctic Rolls	..	..	..	3
Chicklets	..	..	..	8 packets
Steaklets	..	..	..	41 packets
Sponge	..	..	..	1
Chicken Pies	..	..	..	42 packets

## Tinned Fish.

Pilchards	..	..	..	36 tins
Salmon	..	..	..	43 tins
Sardines	..	..	..	35 tins
Roes ..	..	..	..	1 tin
Shrimps	..	..	..	5 tins
Crab ..	..	..	..	4 tins
Prawns	..	..	..	2 tins
Herrings	..	..	..	2 tins
Tuna ..	..	..	..	6 tins

## Soup.

Various Soups	..	..	..	54 tins
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### Tinned Milk.

Evaporated Milk	..	..	..	60 tins
Cream	..	..	..	13 tins

### Tinned Fruit.

Peaches	..	..	..	444 tins
Apricots	..	..	..	97 tins
Pears	..	..	..	139 tins
Fruit Salad	..	..	..	436 tins
Pineapple	..	..	..	310 tins
Grapefruit	..	..	..	30 tins
Oranges	..	..	..	69 tins
Blackcurrants	..	..	..	17 tins
Plums	..	..	..	4 tins
Apples	..	..	..	20 tins
Gooseberries	..	..	..	4 tins
Raspberries	..	..	..	18 tins
Loganberries	..	..	..	18 tins
Cherries	..	..	..	10 tins
Strawberries	..	..	..	4 tins
Prunes	..	..	..	23 tins

### Tinned Vegetables.

Processed Peas	..	..	..	289 tins
Garden Peas	..	..	..	206 tins
Beans in Tomato	..	..	..	154 tins
Mixed Vegetables	..	..	..	10 tins
Sliced Green Beans	..	..	..	19 tins
Carrots	..	..	..	6 tins
Tomatoes	..	..	..	275 tins
Broad Beans	..	..	..	23 tins
Butter Beans	..	..	..	23 tins
Beetroot	..	..	..	5 tins
Peas Pudding	..	..	..	3 tins
Vegetable Juice	..	..	..	1 tin

### Jam and Marmalade.

Apricot Jam	..	..	..	142 tins
Strawberry Jam	..	..	..	248 jars
Plum Jam	..	..	..	201 tins
Blackcurrant Jam	..	..	..	38 jars
Bramble Seedless Jam	..	..	..	1 jar
Apple and Blackberry Jam	..	..	..	1 jar
Raspberry Jam	..	..	..	72 jars
Marmalade	..	..	..	18 jars



## Other Foods.

Rice Pudding	..	..	..	123 tins
Pineapple Juice	..	..	..	9 tins
Orange Juice	..	..	..	15 tins
Grapefruit Juice	..	..	..	7 tins
Paste ..	..	..	..	1 jar
Cereals ..	..	..	..	37 packets
Chocolate Drops	..	..	..	4 lbs.
Biscuits..	..	..	..	17 lbs. 12 ozs.
Strained Foods	..	..	..	9 tins
Sago ..	..	..	..	1 tin
Marmite	..	..	..	1 jar
Golden Syrup	..	..	..	3 tins
Horseradish	..	..	..	10 jars
Tomato Juice	..	..	..	6 tins
Spaghetti	..	..	..	11 tins
Sandwich Spread	..	..	..	3 jars
Ravioli ..	..	..	..	8 tins
Eggs ..	..	..	..	15 dozen
Cheese	..	..	..	2½ lbs.

## PART IV

### HEALTH AND WELFARE SERVICES.

Section 22. Care of Mothers and Young Children.

Section 22. Welfare Foods.

Section 23. Midwifery.

Section 24. Health Visiting.

Section 25. Home Nursing.

Section 26. Vaccination and Immunisation.

Section 28. Prevention of Illness, Care and After-Care.

Compulsory Removals—Nat. Asst. Act. Section 47.

Welfare of Blind, Deaf, Dumb and Crippled persons  
Nat. Asst. Act. Sections 29/30.

Section 29. Home Help Service.

Section 51. Mental Health Service.

## HEALTH & WELFARE SERVICES.

Mr. Chairman, Ladies and Gentlemen,

The important event of 1962 was the production of the 10 year plan for Health and Welfare Services. It is unfortunate to my mind that the opportunity was missed of the Hospital and Local Health Authorities combining in the issue of a joint plan which could have reviewed all the services required both within and outside the community. Instead the publication first of the Hospital Scheme involved the Local Health Authorities in producing a complementary scheme to a plan which was cut and dried and incidentally dealt almost entirely with buildings and not the personnel which would be required to provide the services in them. In my report in July 1962 I reviewed the various services for which the Health and Welfare Committee was responsible and made recommendations relative to the extension to these services which I considered would be required at some period during the next 10 years. In the matter of premises I suggested that a new Infant Welfare and School Clinic would be required for central Hove and that this would be best provided in connection with the Conway Street Development Area. At the same time the Hove and Portslade District Nursing Association reviewed their policy and decided that in all probability a Nurses' Home, now that so many of the staff prefer to live out, would no longer be required at some time during the next 10 years and in its place a modern block of flats should be erected possibly in Portslade where they already possess a property. This would leave open the question of an administrative headquarters which can best be provided in conjunction with or adjacent to the New Infant Welfare Clinic on the Conway Street site referred to above. Still dealing with premises, I had an opportunity of consulting with the officers of the East Sussex Association for the Blind and for the Cripples. The former both felt that a centre combining the provision of recreation and handicraft classes and a rehabilitation unit where the younger blind or those of any age who had recently become blind could be helped during the initial period of their disability which is so difficult. The Cripples' Association felt the need for residential accommodation, possibly with workshops attached for the younger disabled or the younger chronics for whom at present there are only places in Old People's Homes. They also stressed the need for an occupational centre with facilities for recreational activities. All these extensions are subject to the surmounting of many difficulties, sites and finance not the least, but there is certainly a paramount need for a centre which all these handicapped persons could attend either for instruction or recreation. One other aspect of the necessity for fresh premises is in connection with the various welfare services which at present are disposed in different parts of the town, mostly in unsuitable or inconvenient surroundings and it would certainly be advantageous and an aid to efficiency if the Mental Welfare, the Welfare, the Blind Workers and the Children's Officers could all be housed under one roof.

## **Staff.**

Obviously with the increasing demands made upon the Health and Welfare Services in general during the next 10 years it was not to be supposed that increased staff would not be required in all of them, although the exact timing of these additions would have to be controlled by various circumstances. I visualised, therefore, additions to the Medical, Health Visiting, Midwifery and Home Nursing, Home Help and Mental Welfare Staff, although at different intervals of time. Indeed almost before the report had been accepted I had had to bring forward to the present year certain appointments, i.e. an additional Mental Welfare Officer, a Geriatric Health Visitor and an Assistant Area Nursing Officer.

## **Finance.**

As the author of the scheme so far as it affected Hove, I was expected to hazard a guess as to financial implications of my recommendations for each of the succeeding years up to 1972 and my guess on staff alone was a rise in cost of £25,000 at the end of that period. On premises for which Hove would be responsible I estimated £50,000.

It is obvious and indeed it was recognised that the details of this plan would need to be revised and it is in fact a direction of the Ministry of Health that a review takes place every year.

## **Home Nursing.**

An analysis of the figures included in the table on page 62 once again shows the overwhelming preponderance of visits to old people: 51,000 out of 62,000, 1,500 cases out of 2,200, all part of the general plan to keep old people in their own homes as long as possible.

## **Health Visiting.**

The total number of Health Visitors, excluding specialists, is now 10 and in the 10 year plan allowance was made for an addition to be made in 1965/66, but it seems likely that this will be required earlier as the work in West Hove and Portslade is so rapidly increasing. The provision of cars for a greater number of Health Visitors has certainly helped the position but along with this improvement in mobility has been an increase in Welfare Clinics and fresh demands from the School Health Service. Whilst it has not been found possible to attach Health Visitors to particular practices or groups of practices, more and more use is being made of their services by General Practitioners and by the Hospital authorities.

## **Immunisation.**

Whilst continued attention has been paid to maintaining the existing protection against Diphtheria, Whooping Cough, Smallpox and Tetanus, the advent of the oral method of immunisation against Poliomyelitis in April involved a revision of the existing organisation.



Contrary to expectation the elimination of injections has not proved to be so popular as to lead to increased acceptance by parents and adults and this, combined with the absence of cases of the disease, has had an adverse effect upon the figures for complete protection to the extent of a reduction of 50 per cent between 1961-62. It seems that always some dramatic event is required to jolt the British public into welcoming any protective inoculation designed to safeguard their health.

A further alteration in administration was necessitated by the Ministry of Health's recommendation that vaccination against small-pox should be postponed until the second year of life. For many years it has been customary to commence immunisation with smallpox vaccination—it was accepted by the mothers and the babies were not disturbed by it. The new arrangement suffers from the disadvantage that the mothers' attendances in the second year of the babies' lives are more irregular and will require a special effort on our and the parents' parts if the percentage of babies vaccinated is to be maintained.

### **Home Help Service.**

Once again the Home Help Service with its 50 members has enabled some 400 old people to maintain a more tolerable existence in their own homes, even though the number of hours they can devote to any individual cases in any one week is very limited. It is rather unfortunate that the demands on this service are almost entirely for visits in the mornings, understandable perhaps in that old people look to the mid-day meal as the chief meal of the day. On the other hand morning service is all that the majority of the staff are willing or able to spare, a difficulty which is sometimes felt when attendance on maternity cases is required. The practice of early discharge after two days in a maternity hospital for mothers and their infants has meant a renewed demand on the home help service but fortunately this can usually be met by attendance in the mornings only. The multifarious duties of booking, interviewing clients, allocating the home helps, leaves all too little time for supervising in the home and as mentioned in my report consideration will have to be given to the appointment of an assistant in the next year or so.

### **Care of the Aged.**

With the addition of some 500 new cases to the register per year and the investigation of the problems of those already on it, it became evident that my forecast of an additional Health Visitor for this service in 1963-64 would be too late to deal adequately with the demands which always increase during the winter months and in consequence approval was granted to ante-date the appointment to 1963.

Of necessity the energies of these Health Visitors must be devoted to the alleviation of the lot of the worst cases and the provision of medical, nursing and domestic aid, but there is a vast field for the



visiting of the not so urgent cases to alleviate their loneliness and to assist them in their daily tasks of shopping and simple cleaning. To this end discussions have taken place between representatives of the Churches and Voluntary Societies, such as the British Red Cross, with a view to filling in this gap. In this connection I must pay my tribute to the wonderful work of the W.V.S. through their Meals on Wheels Scheme—some 200 old people thereby receive a hot meal on two days a week. I know that it is their wish and aim that this service should be extended to at least three times a week but insurmountable difficulties prevent this at the present time.

I would also like to refer to another service provided by another Voluntary Organisation—the Hove and Portslade District Nursing Association—who by their laundry service make possible the nursing of some 20 to 30 bedridden old people in their own homes. Already the Association has expended some £800 of its own funds on this service.

One great need in Hove is the provision in its own premises of a club which ambulant old people could attend and in which meals could be served—something on the lines of the very successful one in Portslade.

### **The Hospital Plan.**

The 10 year plan for the development of the Hospital Service was issued with considerable publicity in the early part of the year and in my report to the Health and Welfare Committee I commented upon several aspects of it so far as it affected Hove. Briefly it envisaged the establishment of local district hospitals of 600 to 800 beds for all acute cases of physical illness or maternity. Mentally ill patients would be housed in short stay annexes attached to the local District Hospitals—those requiring more extended care would be accommodated in special hospitals drawing from a wide area. The present Mental Hospitals would be reduced in size and ultimately become extinct. Locally the plan provided for the building of Accident and Orthopaedic departments at the Royal Sussex County Hospital between 1962 and 1966 and in the second phase 1967-71 the Brighton General Hospital would be extended and improved. Ultimately it was considered that there would be three hospitals serving this area, the Sussex County Hospital, the Brighton General Hospital and a new hospital of some 600 beds situated, if a site could be found, in Hove. The plan appears to concentrate on the acute illness and there is very little reference to provision for the chronic sick in whose case at present there is a great lack of accommodation and no mention is made of the social responsibility of hospitals not merely to cure the particular illness but to rehabilitate the patient so that he can with the help of the community services yet to be fully developed, resume his place in the world outside. The number of geriatric beds is only to be stepped up by a further 50, so that obviously the Ministry is

relying on a great expansion of the Part III accommodation to redress the balance.

### **Liaison with Hospital Management Committees and Executive Council.**

In the circular which the Ministry of Health issued in connection with the submission of a 10 year plan for Health and Welfare Services, it laid great stress on the desirability of the staff of Local Health Authorities, including those with delegated powers, being in close communication with Local Executive Councils through its Local Medical Committees and in my report I emphasised the necessity for this and also liaison with the Local Management Committee. Unfortunately neither the East Sussex Executive Council nor the Brighton and Hove Management Committee were willing to adopt the Ministry's suggestion, explaining that as the County Medical Officer of Health was already a member of these bodies any information could be obtained through him. This reply disregarded the very obvious fact that unless I know the subjects or projects which are under discussion I can hardly ask for information about them. St. Francis Hospital, however, was more enlightened and made me a member not only of the Medical Committee for the new Day Hospital established in the Old Nurses' Home of the Lady Chichester Hospital, but also a full member of the Group Medical Committee for the parent hospital. I very much appreciate this inclusion in their deliberations and already I have gained useful information to help me in the development of the community services for this area.

### **Housing of Old People.**

The Housing Committee has up to date provided either by new building or by conversions some 400 units of accommodation and in the 1962 programme a further 44 flats were budgeted for. In March 1962 the County Council issued their proposals for financial assistance to District Councils providing flats or flatlets for old people. They offered a fixed subsidy of £30 per annum per unit to District Councils who included welfare facilities in their building programme, i.e. a resident warden, a bell system, a telephone, central heating and hot water supply. They also added further conditions amongst which were a communal sitting room, a laundry room, a utility room and a guest room and the subsidy was to be limited to units on the ground and first floors unless a lift was installed for higher floors and the contribution was confined to limits of 15 units. The Housing Committee examined these proposals and on financial and other grounds they were not in favour of adoption in Hove. In their report they mentioned that in two of their units—Bridge House and Sheridan Terrace—they had what might be termed a partial warden system in that a retired nurse occupied one of the flats and kept an eye on the other residents, but nothing more. I am persuaded that the ideal



provision for old people is a combination of flatlets, where the residents are quite independent and look after themselves, alongside a welfare home. In this connection I was very interested to see an experiment carried out in Harewood Court, the home for beneficiaries maintained by the Masons. The great majority live in separate flats, but the management has recently provided a number of bed-sitting rooms with a common dining room and sitting room for those of the residents who are no longer able to live on their own. Although this is something of a pilot scheme for new homes yet to be built and has not been running very long it has the great advantage of retaining the less active residents under the same roof and the same staff and objections to the transfer when the time arrives have not in fact arisen.

### **Conclusion.**

I would like to thank all members of my staff who deal with these personal services to so many members of the community of all ages and with such varying demands and I would include with them the Officers of the voluntary bodies—the Hove and Portslade District Nursing Association, the East Sussex Association for the Blind and for the Cripples. I have received at times much valuable advice and assistance from the County Medical Officer and the County Welfare Officer for which I am most grateful.

Finally I would wish to record my thanks to the Chairman and Members of the Health and Welfare Services Committee who have always encouraged and supported me in the improvement and development of the various services delegated to them.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

N. E. CHADWICK,

*Medical Officer of Health.*

# ANTE-NATAL AND POST-NATAL CLINICS.

	Number of premises in use at end of year (whether held at Child Welfare Centres or other premises) (2)	Average number of sessions held per month		Number of women in attendance		Total number of attendances	
		Medical Officers Sessions	Midwives Sessions	Number of women who attended	Number of new cases included in col. (4)	Medical Officers Sessions	Midwives Sessions
(1)		(3)		(4)	(5)	(6)	
Local Health Authority Clinics :							
(a) For Ante-Natal examination	—	—	—	—	—	—	—
(b) For Post-Natal examination	—	—	—	—	—	—	—
Clinics provided by Vol. Organisations :							
(c) For Ante-Natal examination	2	4	4	127	72	213	112
(d) For Post-Natal examination	2	4	—	17	17	17	—

## FAMILY PLANNING CLINIC.

The Clinic is run by the Hove and District Branch Family Planning Association and sessions are held each week at the following times :

Infant Welfare Centre, Goldstone Street, Hove—

Monday ..	..	2.0 p.m.—3.30 p.m.
Wednesday	..	6.0 p.m.— 7.0 p.m.
Friday ..	..	10.0 a.m.—11.0 a.m.

The table below gives details of attendances during the year.

			1962
No. of Sessions	..	..	150
New Patients	..	..	388
(of these 54 were pre-maritals)			
Transfer Patients	..	..	88
Check Visits	..	..	865

1,927 purchases of supplies have been made during the year.

### Reasons for seeking advice

Birth Control	..	..	407
Pre-marital ..	..	..	54
Sub-fertility	..	..	6
Marital difficulties	..	..	9

## CARE OF UNMARRIED MOTHERS AND THEIR BABIES.

The Council contributes to the funds of the Chichester Diocesan Moral Welfare Association and in addition contributes to the maintenance of Hove women and their babies for the necessary duration of their stay in Homes. The Association provides the services of Social Workers.

During the year financial assistance was given in 4 cases.

In the majority of cases a contribution is obtained from the Mother (Maternity Benefit), or the parents, and very occasionally from the putative father.

## PUERPERAL PYREXIA.

No cases were notified during the year.

## PROVISION OF FREE MATERNITY OUTFITS.

The Local Health Authority supply free of cost maternity packs containing all the necessary pads, dressings and etceteras for confinement ; these are issued on production of a doctor's certificate to all mothers for home confinements, not to cases booked for hospital or private nursing homes.

68 Maternity Packs were issued during 1962.

Towards the end of the year the distribution of Maternity Packs by the Public Health Department ceased and was taken over by the Hove and Portslade District Nursing Association.



## INFANT WELFARE CENTRES.

At the end of the year there were 3 Infant Welfare Centres and the following indicates number of sessions held each week

Clarendon Villas Infant Welfare Centre.	{	7 Sessions.	{	3 Sessions.
Clarendon Villas, Hove.		Hangleton Infant Welfare Centre West Way, Hove.		

Holland Road Presbyterian Church Hall, Holland Road, Hove.	{	1 Session.

The following table shows the number of attendances at the Welfare Centres during 1962.

## CHILD WELFARE CENTRES.

Centres provided by :	Number of centres provided at end of year	Number of Child Welfare sessions now held per month at centres in col. (2)	Number of children who first attended a centre of this Local Health Authority and who at their first attendance were under 1 year of age	Number of children who attended and who were born in :			Total number of children who attended	Number of attendances during the year made by children who at the date of attendance were :			Total Attendances
				196	1961	1960-57		Under 1 yr.	1 but under 2	2 but under 5	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
(a) L.H.A.	3	30	495	554	585	637	2031	10272	2909	4785	17966
(b) Vol. Org.	—	—	—	—	—	—	—	—	—	—	—

## DENTAL CARE OF EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER SCHOOL AGE.

(a)	Number of Officers employed at end of year on a salary basis in terms of whole-time officers to the maternity and child welfare service : (i) Senior Dental Officer	·04
	(ii) Dental Officers ..	·36
(b)	Number of Officers employed at end of year on a sessional basis in terms of whole-time officers to the maternity and child welfare service .. ..	·01
(c)	Number of dental clinics in operation at end of year ..	2
(d)	Total number of sessions ( <i>i.e.</i> , equivalent complete half days) devoted to maternity and child welfare patients during the year .. .. .	76
(e)	Number of dental technicians employed in the Local Health Authority's own laboratories at the end of the year .. .. .	—

## CARE OF CHILDREN UNDER SCHOOL AGE.

Number of Dentists employed whole-time .. ..	None
Number of Dentists employed part-time .. ..	2
Total number of sessions worked during year ..	176
Number of Dental Clinics .. .. .	2
<hr/>	
Number Examined .. .. .	113
Number Needing Treatment .. .. .	95
Number Treated .. .. .	79
Number Made Dentally fit .. .. .	68
Number of Scaling and Gum Treatments .. ..	1
Number of Fillings .. .. .	265
Number of Silver Nitrate Treatments .. ..	11
Number of Crowns and Inlays .. .. .	—
Number of Extractions .. .. .	44
Number of General Anaesthetics .. .. .	25
Number of Dentures provided .. .. .	—
Number of Radiographs .. .. .	3
Number Any other operations .. .. .	74

# NURSERIES AND CHILD MINDERS REGS. ACT, 1948.

There were 18 Child Minders on the Register at the end of the year.

## DAY NURSERY.

There is one Day Nursery in the Borough situated at 57 Clarendon Villas, Hove where there is accommodation for 20 children 0—2 years and 31 children 2—5 years.

The following table gives figures Re attendances :—

		Number of approved places.		Number of children on the register at the end of year	Average daily attendance year	
		0—2 (3)	2—5 (4)		0—2 (7)	2—5 (8)
(1)	Number (2)			0—2 (5)	2—5 (6)	
Nurseries Maintained by the Council	1	20	31	13	39	13·2 33·6

## WELFARE FOODS SERVICE.

The distribution of these foods was transferred from the Ministry of Food on 28th June, 1954.

The following quantities were issued in this area during 1962.

National Dried Milk Powder (Full/Half Cream)	..	..	6,661 tins
Cod Liver Oil	..	..	1,051 bottles
A and D Tablets	..	..	1,134 packets
Orange Juice	..	..	10,547 bottles

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The foods are available upon application at all Infant Welfare Centres, and the Mothercraft Training Society, Dyke Road, Hove. The Clarendon Villas Infant Welfare Centre in Hove is open on seven half days during the week for the sale of Welfare Foods, and is the main distribution point in the area.

In February 1961 the Ministry of Health increased the prices for Orange Juice, Cod Liver Oil and Vitamin Tablets as follows :—

	<i>Old Price</i>	<i>New Price</i>
Orange Juice	.. 5d. per bottle	1s. 6d. per bottle
Cod Liver Oil	.. free	1s. 0d. per bottle
Vitamin Tablets	.. free	6d. per packet



# DELIVERIES ATTENDED BY MIDWIVES.

	Number of Deliveries attended by Midwives in the Area					
	Domiciliary Cases.					Cases in Institutions
	Doctor not booked.		Doctor booked.		Totals	
	Doctor present at time of delivery of child (2)	Doctor not present at time of delivery of child (3)	Doctor present at time of delivery of child (either the booked Dr. or another) (4)	Doctor not present at time of delivery of child (5)		
(1)	(2)	(3)	(4)	(5)	(6)	(7)
(a) Midwives employed by the Authority ..	—	—	—	—	—	—
(b) Midwives employed by Voluntary Organisations :						
(i) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946 ..	5	28	40	48	121	—
(ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act) ..	—	—	—	—	—	—
(c) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	—	—	—	—	—	3
(d) Midwives in Private Practice (including Midwives employed in Nursing Homes)	—	—	86	—	86	—
Totals ..	5	28	126	48	207	3



### Deliveries Attended by Midwives—*continued*.

(e) Number of cases delivered in Institutions but attended by domiciliary midwives on discharge from Institutions and before the tenth day	..	..	..	..	114
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Number of cases in which medical aid was summoned during the year under Section 14 (1) of the Midwives Act, 1951, by a Midwife, whether a fee was payable by the Local Health Authority or not :

#### (2) Domiciliary Cases :

(i) Where the Medical Practitioner had arranged to provide the patient with maternity medical services under the National Health Service	..	..	..	..	—
(ii) Others	..	..	..	..	26
(b) Cases in Institutions	..	..	..	Total	26
	..	..	..	..	—

# ADMINISTRATION OF INHALATIONAL ANALGESICS.

## (1) Institutional Midwives.

Number of Institutional Midwives in practice in the area at the end of the year qualified to administer inhalational analgesics in accordance with the requirements of the Central Midwives Board :

(a) Employed in homes and hospitals in the National Health Service	..	..	..	—
(b) Employed in nursing homes and maternity homes and hospitals not in the National Health Service	..	..	..	4
Total	..	..	..	4

## (2) Domiciliary Midwives.

	Number of domiciliary Midwives practising in the area at end of year who were qualified to administer inhalational analgesics in accordance with the requirements of the Central Midwives Board (2)	Number of Sets of apparatus for the administration of inhalational analgesics in use at end of year		Number of cases in which inhalational analgesics were administered by Midwives in domiciliary practice			Number of cases in which pethidine was administered by Midwives in domiciliary practice		
		Gas and Air (3)	“Tri-lene” (4)	When doctor was present at time of delivery of child	When doctor was not present at time of delivery of child	When doctor was present at time of delivery of child	When doctor was not present at time of delivery of child		
(1)									
(a) Domiciliary Midwives employed directly by Local Health Authority ..	—	—	—	—	—	—	—	—	—
(b) Domiciliary Midwives employed under Section 23 by Voluntary organisations as agents of Local Health Authority ..	5	1	3	—	33	—	68	30	60
(c) Domiciliary Midwives employed under Section 23 by Hospital Authorities as agents of Local Health Authority ..	—	—	—	—	—	—	—	—	—
(d) Domiciliary Midwives in private practice or employed by organisations not acting as agents of the Local Health Authority	1	—	—	—	—	—	—	—	—
Totals ..	6	1	3	—	33	—	68	30	60

# HEALTH VISITING AND TUBERCULOSIS VISITING.

## A. VISITING.

### HEALTH VISITORS.

### TUBER- CULOSIS VISITORS

	Number of children under 5 years of age visited	Expectant mothers		Children under 1 year of age		Children age 1 and under 2	Children age 2 but under 5	Tuber- culous House- holds	Other cases	Total number of families or house- holds visited by Health Visitors (11)	Total visits paid to tuber- culous house- holds (12)
		First visits	Total visits	First visits	Total visits						
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)		
(a) L.H.A.	2791	209	340	775	4587	1707	3299	4	2347	3026	646
(b) Vol. Org.	—	—	—	—	—	—	—	—	—	—	—

## B. CLINICS.

(a) Total number of attendances made by health visitors at Local Health Authority Clinic Sessions	..	..	294
(b) Total number of attendances by whole-time tuberculosis visitors at chest clinic sessions	..	..	119

# HOME NURSING.

(1)	Medical	Surgical	Infectious Diseases	Tuberculosis	Maternal Complications	Others	Totals	Patients included in (2)-(7) who were 65 or over at the time of the first visit	Children included in (2)-(7) who were under 5 at the time of the first visit	Patients included in (2)-(7) who have had more than 24 visits
Number of Cases attended by Home Nurses	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
(a) L.H.A. ..	—	—	—	—	—	—	—	—	—	—
(b) Vol. Org. under arrangements with the Authority ..	1976	218	—	6	2	1	2203	1573	12	484
Number of Visits paid by Home Nurses										
(c) L.H.A. ..	—	—	—	—	—	—	—	—	—	—
(d) Vol. Org. under arrangements with the Authority ..	57149	4853	—	173	4	12	62191	51816	72	37547

1962.

# DIPHTHERIA IMMUNISATION.

	Children born in years							
	1962	1961	1960	1959	1958	1953/1957	1948/1952	Total
Number of children who completed a full course of Primary Immunisation in the Authority's area (including temporary residents) during the year .. .. .	127	324	20	7	5	91	43	617
Number of children who received a secondary (reinforcing injection (i.e. subsequently to primary immunisation at an earlier age) during the year	—	2	18	5	23	649	142	839



## WHOOPIING COUGH IMMUNISATION, 1962.

Number of children who have completed a primary course (normally 3 injections) of pertussis vaccine (singly or in combination) in the Authority's area during the year ended 31st December, 1962.

Year of birth	Number of children
1962	122
1961	268
1960	21
1959	5
1958	4
1953—1957	9
1948—1952	5
Total	434

## SMALLPOX VACCINATION, 1962.

Age at date of vaccination	Number of persons vaccinated (or re-vaccinated during year	
	Vaccinated	Re-vaccinated
Under 1	522	—
1	45	1
2 – 4	61	30
5 – 14	226	623
15 or over	278	3834
Total	1132	4488

# POLIOMYELITIS VACCINATION—1962

## PART I

Age Group	Number of persons		who have received		
	Salk Vaccine		Oral Vaccine		
	First injection only	Second injection	One dose only	Two doses only	Third dose
(a) Children born 1962	—	—	71	46	32
(b) Children born 1961	80	93	121	149	234
(c) Children and Young Persons born in years 1943-1960 .. ..	108	104	40	43	150
(d) Young Persons born in years 1933-1942 ..	57	68	42	63	163
(e) Others .. ..	68	99	57	50	117
(f) Total .. ..	313	364	331	351	696

## PART II

- (a) Number of persons given third injections of Salk Vaccine 621
- (b) Number of persons given fourth injections of Salk Vaccine 43
- (c) Number of persons given a reinforcing dose of oral vaccine after :
- (i) Two Salk doses .. .. 867
- (ii) Three Salk doses .. .. 441

## OLD PEOPLE—1962.

Total number of new patients visited during the year	..	447
Total number of revisits	.. ..	2678

Admitted to :

County Welfare Homes	..	44
Brighton General Hospital		43
Other Hospitals	.. ..	25
St. Francis Hospital	.. ..	6
Nursing Homes	.. ..	20
Private O.P. Homes	.. ..	8
Moved away from district	..	78

The National Assistance Act 1948, and National Assistance (Amendment) Act, 1951.

### Section 47.

It was necessary to remove 4 persons to Hospital under the above Act during the year.

### Convalescent Holidays.

14 Cases during 1962.

Adults	.. ..	4
Mothers with Children	..	1
Geriatrics	.. ..	8
Blind/Deaf	.. ..	1

## MASS RADIOGRAPHY.

PERIOD 1<sup>ST</sup> JANUARY TO 31<sup>ST</sup> JULY, 1962

<i>Age Groups</i>	<i>Total X-Rayed Male</i>	<i>Total X-Rayed Female</i>	<i>Grand Total X-Rayed</i>
15 & under	16	13	29
16 to 25	145	160	305
26 to 35	124	110	234
36 to 45	158	165	323
46 to 59	218	237	455
60 & under	168	192	360
TOTALS	829	877	1706

565 Examinees were sent to Unit for X-Ray examination by their family doctor.

PERIOD 1<sup>ST</sup> AUGUST TO 31<sup>ST</sup> DECEMBER, 1962

<i>Age Groups</i>	<i>Total X-Rayed Male</i>	<i>Total X-Rayed Female</i>	<i>Grand Total X-Rayed</i>
15 & under	6	19	25
16 to 25	320	297	617
26 to 35	175	173	348
36 to 45	214	245	459
46 to 59	320	361	681
60 & over	272	315	587
TOTALS	1307	1410	2717

361 Examinees were sent to Unit for X-Ray examination by their family doctor.

## WELFARE OF THE BLIND.

From April 1st, 1961, the Borough of Hove assumed responsibility for the Blind Welfare services for the people living within that area. Under the regulations of the Local Government Act of 1958, however, the Borough of Hove continue to use the East Sussex Association for the Blind as Agents. The Borough of Hove has the highest number of blind persons living in any one area in the County, and two Home Teachers, Miss Minns and Mr. Clark, work exclusively in the Borough.

The tables below set out the work done by the Association during the year.

### NUMBER OF REGISTERED BLIND PERSONS.

(As at 31st December, 1962.)

Male	..	..	..	91
Female	..	..	..	150
Total..	..	..	..	<hr/> 241 <hr/>

Children, age under 16 years—3.

### EDUCATION, TRAINING AND EMPLOYMENT.

(16 years and upwards.)

In Special Workshops	..	..	..	4
In Home Workers Schemes	..	..	..	2
Under Ordinary Conditions	..	..	..	11
Total Employed	..	..	..	<hr/> 17 <hr/>
Number not Employed	..	..	..	238

### OCCUPATIONS OF EMPLOYED BLIND PERSONS.

Masseurs and Physiotherapists	..	..	..	2
Musicians (including Music Teachers)	..	..	..	1
Typists, Shorthand Typists, Secretaries	..	..	..	1
Machine Tool Operators	..	..	..	1
Boxers, Fillers, Packers	..	..	..	1
Carpenters and Joiners	..	..	..	1
Knitters, Weavers, etc.	..	..	..	1
Brush Makers	..	..	..	2
Boot and Shoe Repairers	..	..	..	1
Piano Tuners	..	..	..	1
Craftsmen and Production Process Workers	..	..	..	2
Miscellaneous	..	..	..	2
Lecturers, Teachers, Instructors	..	..	..	1
Total	..	..	..	<hr/> 17 <hr/>



THE TABLE BELOW SETS OUT IN DETAIL BLIND PERSONS (ALL AGES) WHO ALSO SUFFER FROM PHYSICAL DEFECTS, MENTAL ILLNESS, ETC.

---

Mentally Ill	..	..	1
Physically Defective	..	..	7
Deaf with Speech	..	..	3
Hard of Hearing	..	..	13
Physically Defective and Deaf with Speech ..	..	..	1
Total..	..	..	25

---

#### NUMBER OF HOME TEACHERS ENGAGED IN THE AREA.

Male	..	..	1
Female	..	..	1
Total..	..	..	2

---

#### NUMBER OF PARTIALLY SIGHTED PERSONS.

(As at 31st December, 1962.)

Male	..	..	24
Female	..	..	57
Total..	..	..	82

---

#### WELFARE OF THE DEAF.

The Sussex Diocesan Association for the Deaf and Dumb attend to the needs of the Deaf and Dumb in the Borough on an Agency basis and they have some 40 people on their register plus a further 7 who are both deaf and blind.

Two other Associations who carry out excellent work in this field are The League of the Hard of Hearing, Brighton, Hove and District and The Hove Club for the Hard of Hearing. The Council made a grant of £20 to both these Associations during the year.

## WELFARE OF THE CRIPPLES.

The East Sussex Association for the Care of Cripples acts as Agent for the Authority in providing certain services for the disabled. The services are provided by trained staff and by voluntary workers.

The Organiser—Miss Bellamy—is in Hove every 2nd and 4th Thursday in the month and any disabled person in need of help can visit her.

Craft Class is held once a week at the Holy Trinity Church Hall, Eaton Gardens, Hove. Approximately 30 people attend.

A Social Club operates on every other Thursday afternoon at St. Phillips Church Hall, New Church Road, Hove, at which some 50 people regularly attend, with 27 voluntary drivers providing transport.

During the past year over 30 disabled people in the Borough of Hove have been added to the Register of Handicapped Persons. Advice on everyday aids has been given and holidays arranged.

The total number of persons on the register is 128.

## HOME HELP SERVICE, 1961.

<i>No. of cases during year in Hove</i>	<i>No. of hours worked by Home Helps</i>
Aged and Chronic = 428	25,605
General Cases = 128	5,173
Maternity Cases = 67	2,802
T.B. Cases = 4	1,057
<hr/> 627	<hr/> 34,637

No. of Home Helps employed at 31st December, 1962—52 Part-time.

## MENTAL HEALTH SERVICE

As indicated in my previous report I feel that if we are to develop a community with the necessary standard of good mental health it is essential to build up the preventative services in the mental health field.

One step in this direction is apparent in the work carried out at the Psychiatric Clinic now held one morning a week to which patients with very early symptoms of mental ill-health can be referred by the General Practitioner. The team, consisting of two Psychiatrists and a Psychiatric Social Worker from the main Psychiatric Hospital, and the Mental Welfare Officer from this Borough, are building up an organisation which, whilst independent of, but working in the closest co-operation with the various hospitals and agencies in the area, investigate the domestic, social and emotional problems at a very early stage and by so doing are preventing the development of mental ill-health, which undetected, would probably result in admission to hospital. Every

effort must be made to expand this type of service by which a standard of good mental health can be achieved rather than, as at present, where emphasis is placed on the provision of mental after-care services to patients who have suffered one or other of the forms of mental illness needing in-patient treatment and who no longer need the hospital services but remain mentally ill in some degree and are discharged out into the community.

The White House Day Hospital is now open and is another step forward in the provision of services with ease of access ; the location of this unit, in Church Road, providing a Therapeutic Community within the community will do much to break down the traditional outlook on mental health brought about by the need of a Hove resident requiring treatment to have to travel some 15 miles to the nearest Psychiatric Hospital, or as in the pre-1948 era, 21 miles to Hellingly Hospital.

An indication that the importance of early investigation is being realised by all concerned is shown in the following tables ; they cover the cases referred to the Mental Health Department by the various agencies with whom a close liaison is maintained.

TABLE I.

REFERRED BY GENERAL PRACTITIONERS.

	<i>Under 16</i>	<i>16 &amp; over</i>	<i>Total</i>
Period ending 31.12.61	22	71	103
„ „ 31.12.62	14	40	54

This indicates the excellent manner in which the majority of the General Practitioners in the area have been able to accept the provisions of the Mental Health Act 1959 in general and the functions of the Mental Welfare Officer in particular.

TABLE II.

REFERRED BY HOSPITALS ON DISCHARGE FROM IN-PATIENT TREATMENT.

	<i>Under 16</i>	<i>16 &amp; over</i>	<i>Total</i>
Period ending 31.12.61	2	8	10
„ „ 31.12.62	7	20	27

TABLE III.

REFERRED BY HOSPITALS AFTER OR DURING OUT-PATIENT OR DAY HOSPITAL TREATMENT.

	<i>Under 16</i>	<i>16 &amp; over</i>	<i>Total</i>
Period ending 31.12.61	2	16	18
„ „ 31.12.62	11	26	37



TABLE IV.

ALL OTHER SOURCES ;  
E.G. HEALTH VISITORS, CHILDREN'S OFFICER, C.A.B., POLICE, ETC.

	<i>Under 16</i>	<i>16 &amp; over</i>	<i>Total</i>
Period ending 31.12.61	10	15	25
„ „ 31.12.62	32	34	66

The number of clients involving the Mental Welfare Officer in casework at 31.12.62 was : Mentally Ill, 71 ; Psychopathic, 1.

In the field of Mentally Handicapped it is also very necessary to provide adequate facilities if these people are to take and maintain their place in the community, the proposed Junior Training Centre for the Mentally Subnormal is now in course of erection and is expected to be open for admissions of up to 60 Junior Pupils and Trainees in the autumn of 1963. Although the Adult Training Centre remains in the planning stage much valuable experience is being acquired by the Hove Trainees who attend the Brighton Centre at Downs View, Coldean, due to the enlightened outlook of the Supervisor and his staff considerable progress has been made. The total number of cases involving the Mental Welfare Officer in this field as at 31.12.62 was :—

Subnormals, 29 ; Severe Subnormals, 53 ; Total 154.

To remedy the very heavy burden of casework and supervision in addition to Statutory Duties out of normal working hours it has been recommended that the Mental Health Staff be increased.

#### REGISTRATION OF NURSING HOMES—1962.

	Number of Homes	Number of Beds provided for :		
		Maternity	Other	Total
Homes first registered during the year ..	—	—	—	—
Homes where registration was withdrawn during the year ..	—	—	—	—
Homes on register at end of the year ..	25	7	356	363
Homes exempt from registration ..	1	—	18	18

## STAFF MEDICAL EXAMINATIONS.

Medical examinations are undertaken by the Department in connection with Borough Council appointments and admissions of student teachers to training colleges, etc. During the year 73 such examinations were carried out, details of which are as follows :—

		Male	Female
Entrants to Training Colleges	..	23	32
Education Dept. (Teachers)	..	11	7

During the same period the following Health Statements were examined and found to be satisfactory and no medical examination was, therefore, necessary.

Education Dept.	..	..	8	16
Further Education	..	..	1	1
Housing Dept.	..	..	5	—
Library	..	..	2	7
Magistrates' Clerk's Dept.	..	..	—	3
Parks and Gardens Dept.	..	..	2	3
Public Health Dept.	..	..	2	1
Surveyor's Dept.	..	..	11	2
Town Clerk's Dept.	..	..	4	3
Treasurer's Dept.	..	..	4	4





**PART V.**  
**SCHOOL HEALTH SERVICE.**

## SCHOOL HEALTH SERVICE.

Mr. Chairman, Ladies and Gentlemen,

Owing to the untimely death of Dr. Martin who had been responsible for much of the organisation of the School Health Service in Hove and Portslade and also to other changes amongst the medical staff, great difficulty was experienced in maintaining the routine of the School Health Service during 1962. In particular the special inspections of the educationally subnormal children and the visits to junior schools to pick out and examine individual children suspected of some defect which might adversely affect their educational progress—a practice which was intended to replace the routine medical inspection of this age group—had to be virtually neglected. Nevertheless, as the various tables reveal, a great deal of routine inspection and supervision continued particularly on the dental side and with speech therapy and child guidance. With the appointment of a full school medical staff it is hoped that it will be possible to re-organise the service so that the investigation of and provision of treatment for all types of defects is adequate.

I would particularly refer to the report of Dr. Eyles, the Assistant Medical Officer responsible for the Audiometry Service (pages 89-90). We are more and more impressed with the handicap which slight deafness imposes on the educational development of the sufferer, the remedy for which is early ascertainment and prompt treatment.

Once again a programme for the ascertainment and protection of susceptible 13-year-old children to Tuberculosis was carried through in the spring term at all schools, including the private ones. It is an index of the diminution of active Tuberculosis in the community that out of 850 tested, some 800 had no natural immunity derived from contact with known cases and all of these were artificially protected by the injection of a vaccine—B.C.G.

Recently a discussion has taken place in the press as to the possible harmful effect upon the 5-year-olds who after leading a carefree existence and opportunity to rest at intervals during the day are suddenly introduced to school attendance for the whole day. I have at the moment no contribution to make towards this controversy but I hope to examine the problem in conjunction with the Head Teachers of Infant Departments during the present school year.

## Conclusion.

I would like to take this opportunity of expressing my thanks to all members of my medical, nursing and lay staff who have co-operated so whole-heartedly in meeting amongst many difficulties the basic requirements of the School Health Service. I would also like to thank all Head Teachers for their wholehearted co-operation and at times forbearance in the task we are all united in—the welfare of the children in their schools. Others whom I would like to mention are Mr. Stearman, Dr. Langford and other County Officers and in particular, I would refer to the continued support, understanding and encouragement I have at all times received from the Special Services Sub-Committee of the Hove Committee for Education.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

N. E. CHADWICK,

*Principal School Medical Officer.*

# PERIODIC MEDICAL INSPECTIONS.

Age groups inspected (by year of birth)	No. of Pupils inspected	Physical Condition of Pupils inspected				Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory		Unsatisfactory		For defec- tive vision (excluding squint)	For any condition recorded at Part II	Total individual pupils
		No.	% of Col. 2	No.	% of Col. 2			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
1958 and later								
1957 ..	312	311	99.67	1	0.33	—	34	33
1956 ..	299	296	98.99	3	1.01	4	46	49
1955 ..	41	40	97.55	1	2.45	2	7	8
1954 ..	39	39	100.00	—	—	—	4	4
1953 ..	29	28	96.55	1	3.45	2	4	6
1952 ..	10	10	100.00	—	—	2	1	3
1951 ..	122	122	100.00	—	—	17	20	34
1950 ..	192	191	99.47	1	0.53	23	46	65
1949 ..	77	76	98.70	1	1.30	14	11	24
1948 ..	4	4	100.00	—	—	—	1	1
1947 and earlier	1,057	1,057	100.00	—	—	205	106	294
Total ..	2,182	2,174	99.63	8	.37	269	280	521



## OTHER INSPECTIONS.

### Notes.

A Special Inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Number of Special Inspections	..	..	172
Number of Re-Inspections	..	..	726
			<hr/>
Total	..	..	898
			<hr/>

## INFESTATION WITH VERMIN.

(a)	Total number of individual examination of pupils in schools by school nurses or other authorised persons	10,005
(b)	Total number of individual pupils found to be infested	42
(c)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	42
(d)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	Nil

## SCREENING TESTS OF VISION & HEARING.

1.	(a)	Is the vision of entrants tested ?	..	<i>No</i>
	(b)	If so, how soon after entry is this done ?	—	
2.		If the vision of entrants is not tested, at what age is the first vision test carried out ?	..	<i>7 plus</i>
3.		How frequently is vision testing repeated throughout a child's school life ?	..	<i>Once</i>
4.	(a)	Is colour vision testing undertaken ?	..	<i>No</i>
	(b)	If so, at what age ?	..	—
	(c)	Are both boys and girls tested ?	..	—
5.		By whom is vision and colour testing carried out ?		<i>School Nurses</i>
6.	(a)	Is audiometric testing of entrants carried out ?	..	<i>Yes</i>
	(b)	If so, how soon after entry is this done ?		<i>1st &amp; 2nd Term</i>
7.		If the hearing of entrants is not tested, at what age is the first audiometric test carried out ?	—	
8.		By whom is audiometric testing carried out ?		<i>Audiometrician</i>

**DEFECTS FOUND BY MEDICAL INSPECTION  
DURING THE YEAR  
PERIODIC INSPECTIONS.**

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS							
		Entrants		Leavers		Others		Total	
		(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
4	Skin .. ..	9	2	32	2	19	2	60	6
5	Eyes—								
	(a) Vision ..	8	1	205	—	56	4	269	5
	(b) Squint ..	22	1	4	—	6	—	32	1
	(c) Other ..	4	2	4	3	2	1	10	6
6	Ears—								
	(a) Hearing ..	1	11	2	4	1	4	4	19
	(b) Otitis Media ..	—	2	—	—	—	—	—	2
	(c) Other ..	3	2	2	1	1	1	6	4
7	Nose and Throat ..	16	30	6	9	9	9	31	48
8	Speech ..	7	4	3	1	7	—	17	5
9	Lymphatic Glands	—	6	—	1	—	1	—	8
10	Heart .. ..	3	4	5	5	5	7	13	16
11	Lungs .. ..	8	8	10	9	3	8	21	25
12	Developmental—								
	(a) Hernia ..	1	—	—	—	—	—	1	—
	(b) Other ..	3	11	—	7	1	10	4	28
13	Orthopaedic—								
	(a) Posture ..	—	—	13	17	7	—	20	17
	(b) Feet ..	5	—	9	10	6	4	20	14
	(c) Other ..	5	3	8	14	5	5	18	22
14	Nervous System—								
	(a) Epilepsy ..	—	—	3	—	1	—	4	—
	(b) Other ..	2	11	1	2	1	1	4	14
15	Psychological—								
	(a) Development	2	2	2	3	—	5	4	10
	(b) Stability ..	3	2	2	16	4	14	9	32
16	Abdomen ..	—	—	1	1	—	1	1	2
17	Other .. ..	1	6	2	5	5	2	8	13

## SPECIAL INSPECTIONS.

Defect Code No.	Defect or Disease	Special Inspections	
		Requiring Treatment	Requiring Observation
(1)	(2)	(3)	(4)
4	Skin .. ..	2	—
5	Eyes—		
	(a) Vision .. ..	76	1
	(b) Squint .. ..	1	—
	(c) Other .. ..	—	—
6	Ears—		
	(a) Hearing .. ..	9	32
	(b) Otitis Media .. ..	—	1
	(c) Other .. ..	—	—
7	Nose and Throat .. ..	1	4
8	Speech .. ..	—	—
9	Lymphatic Glands .. .	—	—
10	Heart .. ..	1	2
11	Lungs .. ..	1	1
12	Developmental—		
	(a) Hernia .. ..	—	—
	(b) Other .. ..	—	4
13	Orthopaedic—		
	(a) Posture .. ..	—	—
	(b) Feet .. ..	2	1
	(c) Other .. ..	—	—
14	Nervous System—		
	(a) Epilepsy .. ..	—	—
	(b) Other .. ..	—	3
15	Psychological—		
	(a) Developmental .. .	—	3
	(b) Stability .. ..	—	10
16	Abdomen .. ..	—	—
17	Other .. ..	3	—

### PART III. EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint .. ..	—
Errors of Refraction (including squint)	393
Total ..	393
Number of pupils for whom spectacles were Prescribed .. ..	195

### DISEASES OF THE SKIN

(Excluding Uncleanliness for which see Table D of Part I)

	Number of cases known to have been treated
Ringworm (i) Scalp .. ..	—
(ii) Body .. ..	—
Scabies .. ..	—
Impetigo .. ..	—
Other skin diseases .. ..	62
Total ..	62



### OTHER TREATMENT GIVEN.

	Number of cases known to have been dealt with
(a) Pupils with minor ailments ..	—
(b) Pupils who received convalescent treatment under School Health Service arrangements ..	—
(c) Pupils who received B.C.G. vaccina- tion .. .. .	618
(d) Other than (a), (b) and (c) above please specify .. .. .	—
Total (a)–(d) ..	618



## HOVE CHILD GUIDANCE CLINIC, 1962.

During the year, 42 Hove children were referred to the Clinic as follows :—

### Referred by :

Assistant School Medical Officers	..	..	11
Private Doctors	..	..	10
Hospitals and Other Clinics	..	..	3
Chief Education Officer	..	..	4
School Psychological Service	..	..	1
Children's Officer	..	..	1
Schools	..	..	7
Parents	..	..	5

### Problems :

Personality Problems and Nervous Disorders	..	9
Habit Disorders	..	5
Behaviour Disorders	..	18
Education Difficulties	..	6
Placement	..	4

### How Dealt With :

Advice	..	4
Psychiatric Treatment	..	9
Periodic Supervision	..	7
Withdrawn before completion	..	8
Transferred to Other Areas	..	3
Admitted to Hospital	..	1
Placed in Special Schools	..	3
Awaiting Diagnosis	..	7

In addition, 22 cases from the County area, and 17 cases from Portslade have been referred to the Hove Clinic and the following summary gives an indication of the work involved :—

### Psychiatrists :

Diagnostic Interviews	..	67
Treatment Interviews	..	314

**Educational Psychologist :**

Diagnostic Interviews	..	..	..	79
Coaching Interviews	..	..	..	85
Tests in School	..	..	..	1
School Visits	..	..	..	58

**Social Worker :**

Interviews at clinics	..	..	..	223
School visits	..	..	..	3
Home and Other visits	..	..	..	151

## SPEECH THERAPY, 1962.

Type of Defect	Discharged				Under Treatment		Total
	Normal	Improved to Maximum	Left School or Area	Non-Attendance	Improved	Not Improved	
Stammerers ..	2	5	2	2	7	3	21
Dyslolics ..	17	5	3	3	46	4	78
Cleft Palate ..	1	—	—	—	2	—	3
Other Conditions ..	1	1	2	—	5	1	10
	21	11	7	5	60	8	112

Number of cases under treatment in January 1962 ..	70
New cases referred during the year .. ..	41
Number of cases discharged .. ..	44
Total number treated .. ..	110
Number of Clinic Sessions .. ..	446
Number of Visiting Sessions .. ..	—
Attendances .. ..	1985
Number waiting in December 1962 .. ..	9

## DENTAL INSPECTION AND TREATMENT.

### Carried out by the Authority.

(1)	Number of pupils inspected by the Authority's Dental Officers :			
	(a)	At Periodic Inspections	.. ..	3364
	(b)	As Specials	.. ..	776
		Total (1)	.. ..	<hr/> 4140 <hr/>
(2)	Number found to require treatment			2238
(3)	Number offered treatment			1739
(4)	Number actually treated			1094
(5)	Attendances made by pupils for treatment			3592
(6)	Half days devoted to : Periodic (School) Inspections			21
		Treatment	.. ..	784
		Total (6)	.. ..	<hr/> 805 <hr/>
(7)	Fillings	Permanent Teeth	.. ..	1979
		Temporary Teeth	.. ..	837
		Total (7)	.. ..	<hr/> 2816 <hr/>
(8)	Number of teeth filled	Permanent Teeth	.. ..	1693
		Temporary Teeth	.. ..	791
		Total (8)	.. ..	<hr/> 2484 <hr/>
(9)	Extractions	Permanent Teeth	.. ..	160
		Temporary Teeth	.. ..	652
		Total (9)	.. ..	<hr/> 812 <hr/>
(10)	Administration of general anaesthetics for extraction			439

(11) ORTHODONTICS :

(a)	Cases commenced during year	..	1
(c)	Cases completed during year ..	..	1
(d)	Cases discontinued during year	..	—
(e)	Pupils treated with appliances	..	1
(f)	Removable appliances fitted ..	..	1
(g)	Fixed appliances fitted ..	..	—
(h)	Total attendances ..	..	4

(12) Number of pupils supplied with artificial dentures .. 1

(13) Other operations :

Permanent Teeth	..	..	..	1019
Temporary Teeth	..	..	..	303
Total (13)			..	1322

**B.C.G. VACCINATION—1962.**

	No. Tested	No. Vaccinated	No. Positive	No. Absent
B'ton, Hove & Sussex Gram.	73	67	3	3
Cottesmore Sec. Mod. ..	56	42	5	9
Davigdor Sec. Girls ..	27	25	1	1
Hove Manor Boys ..	41	39	2	—
Knoll Sec. Girls ..	67	63	2	2
Knoll Sec. Boys ..	85	73	6	6
Portslade Sec. Girls ..	39	33	3	3
Portslade Sec. Boys ..	76	71	4	1
Hove County Gram. Boys ..	69	64	1	4
Hove County Girls ..	109	94	9	6
Nevill Secondary ..	92	83	4	5
Convent of Sacred Heart ..	27	23	1	3
Hove College ..	17	14	2	1
Mowden ..	11	5	1	5
Deepdene ..	7	6	1	—
Shirley Street ..	98	88	7	3
Downs ..	2	1	—	1
Totals :	896	791	52	53



## AUDIOMETRY, 1962

### Under-5-year-old age group.

This year for the first time it has been possible to carry out special screening for assessment of hearing tests on a number of young babies age 9 to 12 months at the various infant welfare centres in the town. These tests are being carried out by the Health Visitors who have had a special course in hearing assessment of young children and the appointments are made direct with the mothers when the baby is about 9 months old. If a child does not pass the special series of tests then it is referred to one of the hearing assessment clinics and followed up as necessary. An attempt has also been made to especially follow up babies considered to be in the "at risk" groups, i.e. :—

(a) *Unborn Children* exposed to the danger of rubella, metabolic disturbances in the mother, e.g. high blood pressure, rhesus factor incompatibility and ante-natal haemorrhage, history of virus infection in mother during pregnancy.

(b) *Newborn Children* exposed to risks by reason of prematurity, anoxia, difficult, prolonged or instrumental labour, and cerebral damage, history of convulsions early in life, any sign of cerebral palsy. Also children showing signs of any other concomitant congenital abnormalities, jaundice or any history of otorrhoea.

As regards children under the age of 5 years who are handicapped by severe loss of hearing it is indeed gratifying to report that it has been possible to find and to appoint with the support of the committee a peripatetic teacher for the deaf to give these little ones a few sessions a week of home tuition. Although these sessions are at the moment the bare minimum, it is envisaged that in the future as this service builds up it will be possible to create a special centre for these children aged under 5 years to attend as a group for audiological training.

### School Children.

This year in addition to the special hearing assessment clinics held it has been possible to have all the school entrants sweep tested by the pure tone audiometer. This test was made on all entrants to maintained infant schools in the area of Hove and Portslade between September 1961 and July 1962. This involved testing a total of 755 children. As the testing was carried out in September—October 1962 all the children were around 6 years of age approximately.

<i>Sweep Tested</i>	<i>Test Passed</i>	<i>Test Failed</i>
755	719	36

Of the 36 children who failed the test 30 attended special hearing assessment clinics and were rechecked and dealt with as follows:—

- (a) One case has been referred to Ear, Nose and Throat Hospital.
- (b) One case has been referred to the Family Doctor.
- (c) One case has been referred to the Educational Psychologist.

The remaining number have been entered on the special register and are being followed up at special hearing assessment clinics and are being kept under observation as necessary.

It is hoped that this sweep testing of school entrants will become a regular feature of school life and thus in time all the school population will have had at least one audiometric check up during the statutory period of school attendance at maintained schools.

Due to various staffing problems during the year it is unfortunate that the number of special hearing assessment clinics has been lowered and the total number of “old” cases re-inspected has been only 43. However, of these 43, it has been possible to close 16 cases which have given satisfactory audiograms and the other 27 are still on the special register.



